

### CIP-3: Short-Term Project Explanation

|                                                               |                                       |                             |                                 |                           |                                   |                       |                          |
|---------------------------------------------------------------|---------------------------------------|-----------------------------|---------------------------------|---------------------------|-----------------------------------|-----------------------|--------------------------|
| <b>Agency:</b>                                                | Agency for Health Care Administration | <b>Agency Priority:</b>     | N/A                             |                           |                                   |                       |                          |
| <b>Budget Entity and Budget Entity Code:</b>                  | Agency<br>68000000                    | <b>Project Category:</b>    | N/A                             |                           |                                   |                       |                          |
| <b>Appropriation Category Code:</b>                           |                                       | <b>LRPP Narrative Page:</b> |                                 |                           |                                   |                       |                          |
| <b>PROJECT TITLE:</b>                                         |                                       |                             |                                 |                           |                                   |                       |                          |
| <b>Statutory Authority:</b>                                   |                                       |                             |                                 |                           |                                   |                       |                          |
| <b>To be Constructed by:</b>                                  |                                       | <b>Contract? (Y/N)</b>      | <b>YES NO</b>                   | <b>Force Acct.? (Y/N)</b> | <b>YES NO</b>                     |                       |                          |
| <b>Facility Type</b>                                          | <b>Service Load</b>                   | <b>Planned Used Factor</b>  | <b>User Stations Required</b>   | <b>Existing Stations</b>  | <b>New User Stations Required</b> | <b>Space Factor</b>   | <b>Net Area Required</b> |
|                                                               |                                       |                             |                                 |                           |                                   |                       |                          |
| <b>Geographic Location:</b>                                   |                                       |                             |                                 |                           |                                   |                       |                          |
| <b>County:</b>                                                |                                       |                             |                                 |                           |                                   |                       |                          |
| <b>Facility Type</b>                                          | <b>Net Area (square feet)</b>         | <b>Efficiency Factor</b>    | <b>Gross Area (square feet)</b> | <b>Unit Cost</b>          | <b>Construction Cost</b>          | <b>Occupancy Date</b> |                          |
|                                                               |                                       |                             |                                 |                           |                                   |                       |                          |
|                                                               |                                       |                             |                                 |                           |                                   |                       |                          |
| <b>Schedule of Project Components</b>                         | <b>FY 2017-18</b>                     | <b>FY 2018-19</b>           | <b>FY 2019-20</b>               | <b>FY 2020-21</b>         | <b>FY 2021-22</b>                 |                       |                          |
| <b>1. Basic Construction Costs</b>                            | \$                                    | \$                          | \$                              | \$                        | \$                                |                       |                          |
| <b>a. Construction Cost</b>                                   |                                       |                             |                                 |                           |                                   |                       |                          |
| <b>b. Permits, Inspections, Impact Fees</b>                   |                                       |                             |                                 |                           |                                   |                       |                          |
| <b>c. Communication requirements (conduits, wiring, etc.)</b> |                                       |                             |                                 |                           |                                   |                       |                          |
| <b>d. Utilities outside building</b>                          |                                       |                             |                                 |                           |                                   |                       |                          |
| <b>e. Site Development (roads, paving, etc.)</b>              |                                       |                             |                                 |                           |                                   |                       |                          |
| <b>f. Energy efficient equipment</b>                          |                                       |                             |                                 |                           |                                   |                       |                          |
| <b>g. Art allowance (Section 255.043, Florida Statutes )</b>  |                                       |                             |                                 |                           |                                   |                       |                          |
| <b>h. Other</b>                                               |                                       |                             |                                 |                           |                                   |                       |                          |
| <b>Subtotal:</b>                                              | \$                                    | \$                          | \$                              | \$                        | \$                                |                       |                          |

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|                                              |                  |                                    |                   |                   |                   |                   |
|----------------------------------------------|------------------|------------------------------------|-------------------|-------------------|-------------------|-------------------|
| <b>2. Other Project Costs</b>                |                  | \$                                 | \$                | \$                | \$                | \$                |
| <b>a. Land/Existing Facility Acquisition</b> |                  |                                    |                   |                   |                   |                   |
| <b>b. Professional Services</b>              |                  |                                    |                   |                   |                   |                   |
| 1) Planning/Programming                      |                  |                                    |                   |                   |                   |                   |
| 2) Architectural/Engineering Fees            |                  |                                    |                   |                   |                   |                   |
| 3) On-site representatives                   |                  |                                    |                   |                   |                   |                   |
| 4) Testing/Surveys                           |                  |                                    |                   |                   |                   |                   |
| 5) Other Professional Services               |                  |                                    |                   |                   |                   |                   |
| <b>c. Miscellaneous Costs</b>                |                  |                                    |                   |                   |                   |                   |
| <b>d. Moveable Equipment/Furniture</b>       |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal:</b>                             |                  |                                    |                   |                   |                   |                   |
| <b>3. All Costs (1 + 2)</b>                  |                  |                                    |                   |                   |                   |                   |
| <b>4. DMS Fee</b>                            |                  |                                    |                   |                   |                   |                   |
| <b>Total: All Costs by Fund</b>              |                  |                                    |                   |                   |                   |                   |
| Fund Code:                                   |                  |                                    |                   |                   |                   |                   |
| Fund Code:                                   |                  |                                    |                   |                   |                   |                   |
| <b>TOTAL (3 + 4)</b>                         |                  | \$                                 | \$                | \$                | \$                | \$                |
| <b>Appropriations to-date:</b>               |                  | <b>Projected Costs Beyond CIP:</b> |                   |                   |                   |                   |
| General Revenue                              |                  | General Revenue                    |                   |                   |                   |                   |
| Trust Funds                                  |                  | Trust Funds                        |                   |                   |                   |                   |
| <b>TOTAL</b>                                 |                  | <b>TOTAL</b>                       |                   |                   | \$0               | \$0               |
| <b>Changes in Agency Service Costs</b>       |                  | <b>FY 2017-18</b>                  | <b>FY 2018-19</b> | <b>FY 2019-20</b> | <b>FY 2020-21</b> | <b>FY 2021-22</b> |
| <b>Category</b>                              | <b>Fund Code</b> | <b>\$</b>                          | <b>\$</b>         | <b>\$</b>         | <b>\$</b>         | <b>\$</b>         |
| Salaries & Benefits                          |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| OPS                                          |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| Expenses                                     |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| Other (Specify)                              |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| <b>Fund Totals</b>                           |                  |                                    |                   |                   |                   |                   |
| <b>TOTAL</b>                                 |                  | \$                                 | \$                | \$                | \$                | \$                |

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|                                                               |                                        |                             |                                 |                           |                                   |                       |                          |
|---------------------------------------------------------------|----------------------------------------|-----------------------------|---------------------------------|---------------------------|-----------------------------------|-----------------------|--------------------------|
| <b>Agency:</b>                                                | Agency for Health Care Administration  | <b>Agency Priority:</b>     | N/A                             |                           |                                   |                       |                          |
| <b>Budget Entity and Budget Entity Code:</b>                  | Administration and Support<br>68200000 | <b>Project Category:</b>    | N/A                             |                           |                                   |                       |                          |
| <b>Appropriation Category Code:</b>                           |                                        | <b>LRPP Narrative Page:</b> |                                 |                           |                                   |                       |                          |
| <b>PROJECT TITLE:</b>                                         |                                        |                             |                                 |                           |                                   |                       |                          |
| <b>Statutory Authority:</b>                                   |                                        |                             |                                 |                           |                                   |                       |                          |
| <b>To be Constructed by:</b>                                  |                                        | <b>Contract? (Y/N)</b>      | <b>YES NO</b>                   | <b>Force Acct.? (Y/N)</b> | <b>YES NO</b>                     |                       |                          |
| <b>Facility Type</b>                                          | <b>Service Load</b>                    | <b>Planned Used Factor</b>  | <b>User Stations Required</b>   | <b>Existing Stations</b>  | <b>New User Stations Required</b> | <b>Space Factor</b>   | <b>Net Area Required</b> |
|                                                               |                                        |                             |                                 |                           |                                   |                       |                          |
| <b>Geographic Location:</b>                                   |                                        |                             |                                 |                           |                                   |                       |                          |
| <b>County:</b>                                                |                                        |                             |                                 |                           |                                   |                       |                          |
| <b>Facility Type</b>                                          | <b>Net Area (square feet)</b>          | <b>Efficiency Factor</b>    | <b>Gross Area (square feet)</b> | <b>Unit Cost</b>          | <b>Construction Cost</b>          | <b>Occupancy Date</b> |                          |
|                                                               |                                        |                             |                                 |                           |                                   |                       |                          |
|                                                               |                                        |                             |                                 |                           |                                   |                       |                          |
| <b>Schedule of Project Components</b>                         | <b>FY 2017-18</b>                      | <b>FY 2018-19</b>           | <b>FY 2019-20</b>               | <b>FY 2020-21</b>         | <b>FY 2021-22</b>                 |                       |                          |
| <b>1. Basic Construction Costs</b>                            | \$                                     | \$                          | \$                              | \$                        | \$                                |                       |                          |
| <b>a. Construction Cost</b>                                   |                                        |                             |                                 |                           |                                   |                       |                          |
| <b>b. Permits, Inspections, Impact Fees</b>                   |                                        |                             |                                 |                           |                                   |                       |                          |
| <b>c. Communication requirements (conduits, wiring, etc.)</b> |                                        |                             |                                 |                           |                                   |                       |                          |
| <b>d. Utilities outside building</b>                          |                                        |                             |                                 |                           |                                   |                       |                          |
| <b>e. Site Development (roads, paving, etc.)</b>              |                                        |                             |                                 |                           |                                   |                       |                          |
| <b>f. Energy efficient equipment</b>                          |                                        |                             |                                 |                           |                                   |                       |                          |
| <b>g. Art allowance (Section 255.043, Florida Statutes )</b>  |                                        |                             |                                 |                           |                                   |                       |                          |
| <b>h. Other</b>                                               |                                        |                             |                                 |                           |                                   |                       |                          |
| <b>Subtotal:</b>                                              | \$                                     | \$                          | \$                              | \$                        | \$                                |                       |                          |

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|                                              |                  |                                    |                   |                   |                   |                   |
|----------------------------------------------|------------------|------------------------------------|-------------------|-------------------|-------------------|-------------------|
| <b>2. Other Project Costs</b>                |                  | \$                                 | \$                | \$                | \$                | \$                |
| <b>a. Land/Existing Facility Acquisition</b> |                  |                                    |                   |                   |                   |                   |
| <b>b. Professional Services</b>              |                  |                                    |                   |                   |                   |                   |
| 1) Planning/Programming                      |                  |                                    |                   |                   |                   |                   |
| 2) Architectural/Engineering Fees            |                  |                                    |                   |                   |                   |                   |
| 3) On-site representatives                   |                  |                                    |                   |                   |                   |                   |
| 4) Testing/Surveys                           |                  |                                    |                   |                   |                   |                   |
| 5) Other Professional Services               |                  |                                    |                   |                   |                   |                   |
| <b>c. Miscellaneous Costs</b>                |                  |                                    |                   |                   |                   |                   |
| <b>d. Moveable Equipment/Furniture</b>       |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal:</b>                             |                  |                                    |                   |                   |                   |                   |
| <b>3. All Costs (1 + 2)</b>                  |                  |                                    |                   |                   |                   |                   |
| <b>4. DMS Fee</b>                            |                  |                                    |                   |                   |                   |                   |
| <b>Total: All Costs by Fund</b>              |                  |                                    |                   |                   |                   |                   |
| Fund Code:                                   |                  |                                    |                   |                   |                   |                   |
| Fund Code:                                   |                  |                                    |                   |                   |                   |                   |
| <b>TOTAL (3 + 4)</b>                         |                  | \$                                 | \$                | \$                | \$                | \$                |
| <b>Appropriations to-date:</b>               |                  | <b>Projected Costs Beyond CIP:</b> |                   |                   |                   |                   |
| General Revenue                              |                  | General Revenue                    |                   |                   |                   |                   |
| Trust Funds                                  |                  | Trust Funds                        |                   |                   |                   |                   |
| <b>TOTAL</b>                                 |                  | <b>TOTAL</b>                       |                   |                   | \$0               | \$0               |
| <b>Changes in Agency Service Costs</b>       |                  | <b>FY 2017-18</b>                  | <b>FY 2018-19</b> | <b>FY 2019-20</b> | <b>FY 2020-21</b> | <b>FY 2021-22</b> |
| <b>Category</b>                              | <b>Fund Code</b> | <b>\$</b>                          | <b>\$</b>         | <b>\$</b>         | <b>\$</b>         | <b>\$</b>         |
| Salaries & Benefits                          |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| OPS                                          |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| Expenses                                     |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| Other (Specify)                              |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| <b>Fund Totals</b>                           |                  |                                    |                   |                   |                   |                   |
| <b>TOTAL</b>                                 |                  | \$                                 | \$                | \$                | \$                | \$                |

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|                                                               |                                       |                            |                                 |                           |                                   |                       |                          |
|---------------------------------------------------------------|---------------------------------------|----------------------------|---------------------------------|---------------------------|-----------------------------------|-----------------------|--------------------------|
| <b>Agency:</b>                                                | Agency for Health Care Administration |                            | <b>Agency Priority:</b>         | N/A                       |                                   |                       |                          |
| <b>Budget Entity and Budget Entity Code:</b>                  | Health Care Services<br>68500000      |                            | <b>Project Category:</b>        | N/A                       |                                   |                       |                          |
| <b>Appropriation Category Code:</b>                           |                                       |                            | <b>LRPP Narrative Page:</b>     |                           |                                   |                       |                          |
| <b>PROJECT TITLE:</b>                                         |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>Statutory Authority:</b>                                   |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>To be Constructed by:</b>                                  |                                       | <b>Contract? (Y/N)</b>     | <b>YES NO</b>                   | <b>Force Acct.? (Y/N)</b> | <b>YES NO</b>                     |                       |                          |
| <b>Facility Type</b>                                          | <b>Service Load</b>                   | <b>Planned Used Factor</b> | <b>User Stations Required</b>   | <b>Existing Stations</b>  | <b>New User Stations Required</b> | <b>Space Factor</b>   | <b>Net Area Required</b> |
|                                                               |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>Geographic Location:</b>                                   |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>County:</b>                                                |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>Facility Type</b>                                          | <b>Net Area (square feet)</b>         | <b>Efficiency Factor</b>   | <b>Gross Area (square feet)</b> | <b>Unit Cost</b>          | <b>Construction Cost</b>          | <b>Occupancy Date</b> |                          |
|                                                               |                                       |                            |                                 |                           |                                   |                       |                          |
|                                                               |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>Schedule of Project Components</b>                         | <b>FY 2017-18</b>                     | <b>FY 2018-19</b>          | <b>FY 2019-20</b>               | <b>FY 2020-21</b>         | <b>FY 2021-22</b>                 |                       |                          |
| <b>1. Basic Construction Costs</b>                            | \$                                    | \$                         | \$                              | \$                        | \$                                |                       |                          |
| <b>a. Construction Cost</b>                                   |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>b. Permits, Inspections, Impact Fees</b>                   |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>c. Communication requirements (conduits, wiring, etc.)</b> |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>d. Utilities outside building</b>                          |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>e. Site Development (roads, paving, etc.)</b>              |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>f. Energy efficient equipment</b>                          |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>g. Art allowance (Section 255.043, Florida Statutes )</b>  |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>h. Other</b>                                               |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>Subtotal:</b>                                              | \$                                    | \$                         | \$                              | \$                        | \$                                |                       |                          |

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|                                              |                  |                                    |                   |                   |                   |                   |
|----------------------------------------------|------------------|------------------------------------|-------------------|-------------------|-------------------|-------------------|
| <b>2. Other Project Costs</b>                |                  | \$                                 | \$                | \$                | \$                | \$                |
| <b>a. Land/Existing Facility Acquisition</b> |                  |                                    |                   |                   |                   |                   |
| <b>b. Professional Services</b>              |                  |                                    |                   |                   |                   |                   |
| 1) Planning/Programming                      |                  |                                    |                   |                   |                   |                   |
| 2) Architectural/Engineering Fees            |                  |                                    |                   |                   |                   |                   |
| 3) On-site representatives                   |                  |                                    |                   |                   |                   |                   |
| 4) Testing/Surveys                           |                  |                                    |                   |                   |                   |                   |
| 5) Other Professional Services               |                  |                                    |                   |                   |                   |                   |
| <b>c. Miscellaneous Costs</b>                |                  |                                    |                   |                   |                   |                   |
| <b>d. Moveable Equipment/Furniture</b>       |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal:</b>                             |                  |                                    |                   |                   |                   |                   |
| <b>3. All Costs (1 + 2)</b>                  |                  |                                    |                   |                   |                   |                   |
| <b>4. DMS Fee</b>                            |                  |                                    |                   |                   |                   |                   |
| <b>Total: All Costs by Fund</b>              |                  |                                    |                   |                   |                   |                   |
| Fund Code:                                   |                  |                                    |                   |                   |                   |                   |
| Fund Code:                                   |                  |                                    |                   |                   |                   |                   |
| <b>TOTAL (3 + 4)</b>                         |                  | \$                                 | \$                | \$                | \$                | \$                |
| <b>Appropriations to-date:</b>               |                  | <b>Projected Costs Beyond CIP:</b> |                   |                   |                   |                   |
| General Revenue                              |                  | General Revenue                    |                   |                   |                   |                   |
| Trust Funds                                  |                  | Trust Funds                        |                   |                   |                   |                   |
| <b>TOTAL</b>                                 |                  | <b>TOTAL</b>                       |                   |                   | <b>TOTAL</b>      |                   |
|                                              |                  | \$0                                |                   |                   |                   | \$0               |
| <b>Changes in Agency Service Costs</b>       |                  | <b>FY 2017-18</b>                  | <b>FY 2018-19</b> | <b>FY 2019-20</b> | <b>FY 2020-21</b> | <b>FY 2021-22</b> |
| <b>Category</b>                              | <b>Fund Code</b> | <b>\$</b>                          | <b>\$</b>         | <b>\$</b>         | <b>\$</b>         | <b>\$</b>         |
| <b>Salaries &amp; Benefits</b>               |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| <b>OPS</b>                                   |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| <b>Expenses</b>                              |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| <b>Other (Specify)</b>                       |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| <b>Fund Totals</b>                           |                  |                                    |                   |                   |                   |                   |
| <b>TOTAL</b>                                 |                  | \$                                 | \$                | \$                | \$                | \$                |

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|                                                               |                                       |                            |                                 |                           |                                   |                       |                          |
|---------------------------------------------------------------|---------------------------------------|----------------------------|---------------------------------|---------------------------|-----------------------------------|-----------------------|--------------------------|
| <b>Agency:</b>                                                | Agency for Health Care Administration |                            | <b>Agency Priority:</b>         | N/A                       |                                   |                       |                          |
| <b>Budget Entity and Budget Entity Code:</b>                  | Health Care Regulation<br>68700700    |                            | <b>Project Category:</b>        | N/A                       |                                   |                       |                          |
| <b>Appropriation Category Code:</b>                           |                                       |                            | <b>LRPP Narrative Page:</b>     |                           |                                   |                       |                          |
| <b>PROJECT TITLE:</b>                                         |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>Statutory Authority:</b>                                   |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>To be Constructed by:</b>                                  |                                       | <b>Contract? (Y/N)</b>     | <b>YES NO</b>                   | <b>Force Acct.? (Y/N)</b> | <b>YES NO</b>                     |                       |                          |
| <b>Facility Type</b>                                          | <b>Service Load</b>                   | <b>Planned Used Factor</b> | <b>User Stations Required</b>   | <b>Existing Stations</b>  | <b>New User Stations Required</b> | <b>Space Factor</b>   | <b>Net Area Required</b> |
|                                                               |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>Geographic Location:</b>                                   |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>County:</b>                                                |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>Facility Type</b>                                          | <b>Net Area (square feet)</b>         | <b>Efficiency Factor</b>   | <b>Gross Area (square feet)</b> | <b>Unit Cost</b>          | <b>Construction Cost</b>          | <b>Occupancy Date</b> |                          |
|                                                               |                                       |                            |                                 |                           |                                   |                       |                          |
|                                                               |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>Schedule of Project Components</b>                         | <b>FY 2017-18</b>                     | <b>FY 2018-19</b>          | <b>FY 2019-20</b>               | <b>FY 2020-21</b>         | <b>FY 2021-22</b>                 |                       |                          |
| <b>1. Basic Construction Costs</b>                            | \$                                    | \$                         | \$                              | \$                        | \$                                |                       |                          |
| <b>a. Construction Cost</b>                                   |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>b. Permits, Inspections, Impact Fees</b>                   |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>c. Communication requirements (conduits, wiring, etc.)</b> |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>d. Utilities outside building</b>                          |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>e. Site Development (roads, paving, etc.)</b>              |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>f. Energy efficient equipment</b>                          |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>g. Art allowance (Section 255.043, Florida Statutes )</b>  |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>h. Other</b>                                               |                                       |                            |                                 |                           |                                   |                       |                          |
| <b>Subtotal:</b>                                              | \$                                    | \$                         | \$                              | \$                        | \$                                |                       |                          |

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|                                              |                  |                                    |                   |                   |                   |                   |
|----------------------------------------------|------------------|------------------------------------|-------------------|-------------------|-------------------|-------------------|
| <b>2. Other Project Costs</b>                |                  | \$                                 | \$                | \$                | \$                | \$                |
| <b>a. Land/Existing Facility Acquisition</b> |                  |                                    |                   |                   |                   |                   |
| <b>b. Professional Services</b>              |                  |                                    |                   |                   |                   |                   |
| 1) Planning/Programming                      |                  |                                    |                   |                   |                   |                   |
| 2) Architectural/Engineering Fees            |                  |                                    |                   |                   |                   |                   |
| 3) On-site representatives                   |                  |                                    |                   |                   |                   |                   |
| 4) Testing/Surveys                           |                  |                                    |                   |                   |                   |                   |
| 5) Other Professional Services               |                  |                                    |                   |                   |                   |                   |
| <b>c. Miscellaneous Costs</b>                |                  |                                    |                   |                   |                   |                   |
| <b>d. Moveable Equipment/Furniture</b>       |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal:</b>                             |                  |                                    |                   |                   |                   |                   |
| <b>3. All Costs (1 + 2)</b>                  |                  |                                    |                   |                   |                   |                   |
| <b>4. DMS Fee</b>                            |                  |                                    |                   |                   |                   |                   |
| <b>Total: All Costs by Fund</b>              |                  |                                    |                   |                   |                   |                   |
| Fund Code:                                   |                  |                                    |                   |                   |                   |                   |
| Fund Code:                                   |                  |                                    |                   |                   |                   |                   |
| <b>TOTAL (3 + 4)</b>                         |                  | \$                                 | \$                | \$                | \$                | \$                |
| <b>Appropriations to-date:</b>               |                  | <b>Projected Costs Beyond CIP:</b> |                   |                   |                   |                   |
| General Revenue                              |                  | General Revenue                    |                   |                   |                   |                   |
| Trust Funds                                  |                  | Trust Funds                        |                   |                   |                   |                   |
| <b>TOTAL</b>                                 |                  | <b>TOTAL</b>                       |                   |                   | \$0               | \$0               |
| <b>Changes in Agency Service Costs</b>       |                  | <b>FY 2017-18</b>                  | <b>FY 2018-19</b> | <b>FY 2019-20</b> | <b>FY 2020-21</b> | <b>FY 2021-22</b> |
| <b>Category</b>                              | <b>Fund Code</b> | <b>\$</b>                          | <b>\$</b>         | <b>\$</b>         | <b>\$</b>         | <b>\$</b>         |
| Salaries & Benefits                          |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| OPS                                          |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| Expenses                                     |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| Other (Specify)                              |                  |                                    |                   |                   |                   |                   |
| <b>Subtotal</b>                              |                  |                                    |                   |                   |                   |                   |
| <b>Fund Totals</b>                           |                  |                                    |                   |                   |                   |                   |
| <b>TOTAL</b>                                 |                  | \$                                 | \$                | \$                | \$                | \$                |

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